FORM BU-2

UNIFORM CONSENT TO SERVICE OF PROCESS

KNOW ALL MEN BY THESE PRESENTS:

That the undersigned, ________, (a corporation organized under the laws of the State of ________) or a (partnership)(an individual)(other) ________) for the purpose of complying with the laws of the State of South Dakota relating to the registration of business opportunities, hereby irrevocably appoints the Director of Insurance and the successors in such office, its attorney in the State of South Dakota upon whom may be served any notice, process or pleading in any action or proceeding against it arising out of or in connection with the sale of business opportunities or out of violation of the aforesaid laws of South Dakota; and the undersigned does hereby consent that any action or proceeding against it may be commenced in any court of competent jurisdiction and proper venue within South Dakota by service of process upon said officer with the same effect as if the undersigned was organized or created under the laws of South Dakota and had lawfully been served with process in South Dakota.

It is requested that a copy of any notice, process or pleading served hereunder be mailed to:

(Name and Address)

Dated _____, 20_____

By_____

Title_____

By_____

Title_____

(Seal)

FORM BU-2

CORPORATE ACKNOWLEDGEMENT

STATE OF) SS.
COUNTY OF	_)
On thisday of (Notary) personally appeared, (President) personally to me the President and Secretar	, 20, before me the undersigned officers, andknown (Secretary) y, respectively of
corporation, and that they, as such officers, being authorized so to do, executed the foregoing instrument for the purposes therein contained, by signing the name of the corporation, by themselves as such officers.	
IN WITNESS THEREOF I have hereunto set my hand and official seal.	
(Notarial Seal)	Notary Public My Commission Expires
INDIVIDUAL OR PARTNERSHIP ACKNOWLEDGEMENT	
STATE OF) SS. _)
(Notary) personally apper (partner or individual) to be the same person(s) whose name(s) is (acknowledged the execution thereof for the	, 20, before me the undersigned officer, eared and he/she is known personally to me (are) signed to the foregoing instrument, and uses and purposed therein set forth eunto set my hand and official seal.

Notary Public

(Notarial Seal)

My Commission Expires_____